KENTUCKY BOARD OF REGISTRATION FOR PROFESSIONAL GEOLOGISTS PO Box 1360 Frankfort, KY 40602

http://bpg.ky.gov

Application for Reinstatement as a Geologist-In-Training

In accordance with KRS 322A.060 (2) When the renewal fee is not paid within ninety (90) days after the expiration date, that individual's certificate of registration shall be suspended and the name shall be deleted from the roster of the Board until the renewal fee is paid. 201 KAR 31:050-Section 4-After the ninety (90) day grace period and before the end of two (2) year, a Geologist-In-Training suspended for failure to renew, **may have his certificate of registration reinstated upon:** (1) payment of the reinstatement fee as provided by 201 KAR 31:010, section 3(3); (2) completion of the Application for Reinstatement and (3) documentation of employment from the time of suspension until the present. The reinstatement fee is \$100.00 (check or money order only) made payable to the Kentucky State Treasurer.

PLEASE COMPLETE ALL OF THE FOLLOWING:

Name			Present place	of e	mploym	ent	
Address			Address				
Address			Address				
City	State	Zip	City		Sta	nte	Zip
Home telepho	ne number		Business telep	hon	e numbe	er	
Home e-mail a	address		Business e-ma	il ad	dress		
XXX-XX-	y number (last four	dicita)	Certification				
Social Security	y number (last lour	digits)	Ceruncation	llulli	ber		
•	en convicted of a fel fense and provide de	•	application or renewal? sheet of paper.	() No	() Yes
2. Have you been denied registration/certification/licensure in another state? If yes, give details on a separate sheet of paper.				() No	() Yes
3. Have you been subject to disciplinary action in another state?				() No	() Yes
4. Are you currently serving in the military?				() No	() Yes

(Reverse side must be completed)

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5.	List any state in which you have become registered/certified/licensed since your last renewal
6.	What is your current primary employment setting? (check one)
	Government Agency
	Private Industry or Business (single employer)
	Consulting (multiple clients or employers)
	Academic Institution
	Other (please describe):
7.	What is your current primary area of practice? (check one)
	Environmental Geology/Hydrogeology
	Engineering Geology/Geotechnical
	Mineral Resources - Coal
	Mineral Resources - Oil and Gas
	Other (please describe):
	AFFIDAVIT
cor	o certify under penalty of law that the information contained herein is true, correct, and applete to the best of my knowledge and belief. I am aware that, should investigation at time disclose any such misrepresentation or falsification I could be subject the ciplinary action by the Board of Registration for Professional Geologists.
Sig	nature: Date:
(Si	gn your name - Do not print or type)

Reinstatement Application